

Statistical Brief



Prepared by the State Center for Health Statistics

For the Council on Health Policy Information

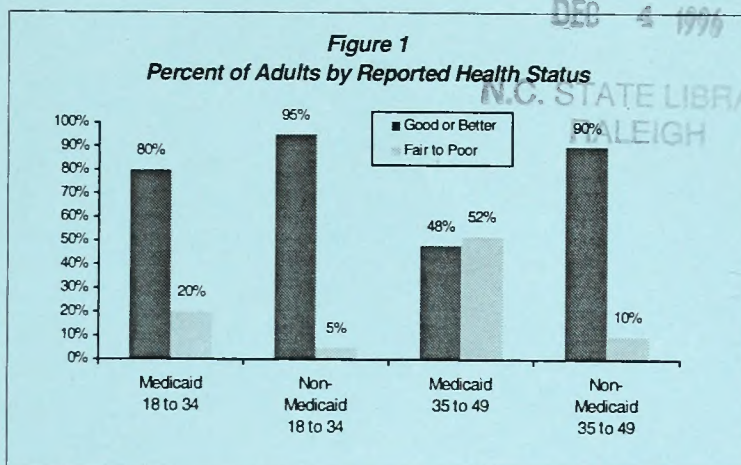
December 1996

HEALTH STATUS AND ACCESS TO ROUTINE CARE – North Carolina Adults Under Age 50 by Medicaid Status

According to a recent telephone survey of North Carolina households, adult (age 18 and over) Medicaid enrollees are less healthy than are non-Medicaid adults. Health status in this case was assessed using five indicators: a general self-report of health status (Poor to Excellent); reported limitations on physical activities; number of times hospitalized during last year; number of visits to the emergency room during last year; and the occurrence of a major health problem during last year.

Medicaid enrollees had more routine care visits and were more likely than non-Medicaid adults to report problems getting to or from their source of routine care. Additionally, Medicaid enrollees were more likely to use the hospital or emergency room as a source of routine care.

The data for this Statistical Brief are from the North Carolina Health Profile (NCHP), a telephone survey of North Carolina households. The NCHP consists of three modules – adult health survey, child health survey, and a young child survey (newborn to six years). The information in this Statistical Brief is from the adult health module. The adult health survey was designed to collect data on health status, access to care, and attitudes about health care issues. The survey was administered by the Survey



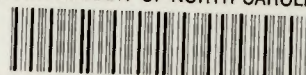
Research Unit (SRU) at the University of North Carolina at Chapel Hill. The analysis of the survey is being conducted by the State Center for Health Statistics.

In 1994, a goal of the state's Health Planning Commission was to change the focus of the current health system from a "curative medical system" to "one that focuses on keeping people healthy."¹ With this in mind, this Brief focuses on the present health status and access to routine (preventive) care among adults under age 50. Data for ages 50 to 64, and 65 and over are presented in separate Briefs.^{2,3}

A higher percentage of Medicaid enrollees reports fair to poor health (Figure 1).

- Compared to non-Medicaid individuals, Medicaid enrollees reported more often their health as being fair to poor.
- Over half of Medicaid enrollees aged 35 to 49 reported having fair to poor health. This is much greater than the 10 percent reported by non-Medicaid individuals in the same age group.





- Among the 34 and younger age group, 20 percent of the Medicaid enrollees reported fair to poor health compared to only 5 percent of non-Medicaid individuals.

More Medicaid enrollees reported a major health problem during the last year.

- About 22 percent of Medicaid enrollees reported a major health problem during the last year. This compares to 8 percent of the non-Medicaid population.
- Thirty-five percent of Medicaid enrollees responded that they or a related household member had a major health problem during the last year. This is over two times that for non-Medicaid individuals.

Medicaid enrollees are more likely to have physical limitations due to health.

- Medicaid enrollees reported three or more physical limitations more often than did non-Medicaid individuals.
- Over 25 percent of the Medicaid enrollees reported that activities associated with work, housework, or school work were limited due to their health.

Medicaid enrollees report hospitalization and emergency room use more often.

- Medicaid enrollees were hospitalized more often, and were more likely to report having been hospitalized two or more times during the last year.
- Fifty-four percent of Medicaid enrollees went to an emergency room or urgent care center during the last year, compared to 22 percent of non-Medicaid individuals.

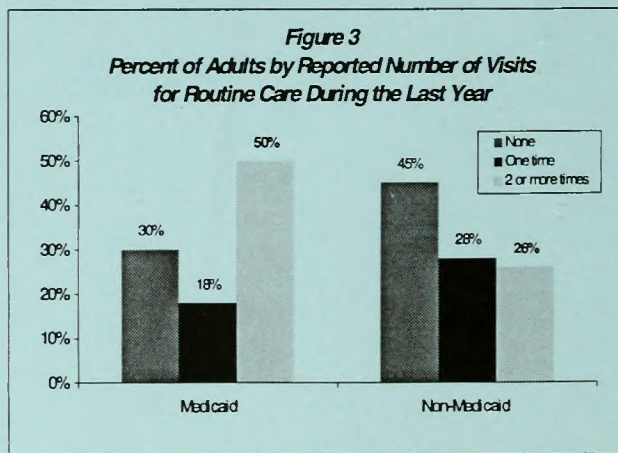
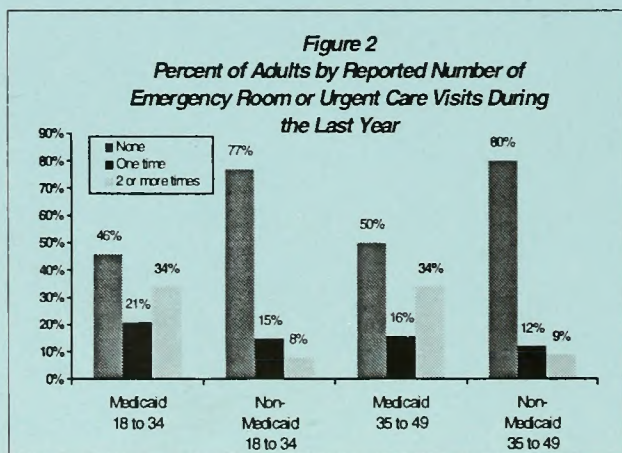
- The Medicaid population's greater use of the emergency room was true for both age groups. Additionally, Medicaid enrollees were much more likely to have gone two or more times to the emergency room during the last year, compared to the non-Medicaid group (Figure 2).

Medicaid enrollees are more likely to report having a usual source of routine health care.

- Eighty-one percent of Medicaid enrollees reported having a usual source of routine health care. By comparison, 72 percent of non-Medicaid individuals indicated a usual source of routine care.
- Twelve percent of Medicaid enrollees compared to seven percent of non-Medicaid adults reported using the hospital, emergency room, or urgent care center as their source of routine care.
- Medicaid enrollees were also more likely than others to use neighborhood or government clinics for routine care.

Over one-fourth of Medicaid enrollees and almost half of non-Medicaid individuals report no routine care in the last year.

- Twenty-nine percent of Medicaid enrollees reported not going for routine care in the last year. By comparison, 45 percent of non-Medicaid individuals reported not going for routine care (Figure 3).
- Half of Medicaid enrollees went 2 or more times for routine care during the last year. Only 26 percent of non-Medicaid individuals went 2 or more times.

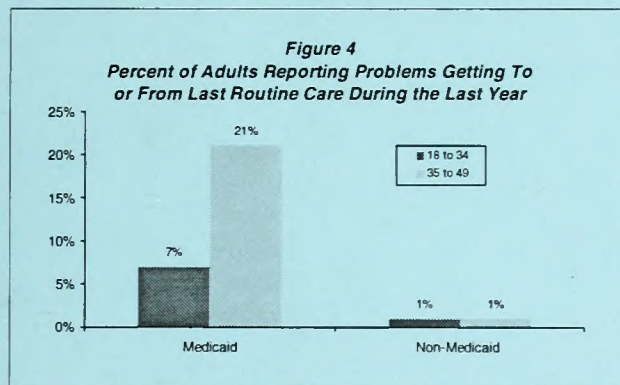


More non-Medicaid individuals report they could not get routine care when they needed it.

- Five percent of non-Medicaid enrollees reported they could not get routine care when they needed it during the past year. By comparison, two percent of Medicaid individuals reported not getting the routine care they needed.

More Medicaid enrollees report problems getting to or from routine care in the last year.

- Almost 11 percent of Medicaid enrollees reported problems getting to or from their routine care provider. Less than one percent of the non-Medicaid population reported a problem.
- Medicaid enrollees aged 35 to 49 years had the greatest difficulty, with 22 percent reporting problems getting to or from their routine care (Figure 4).

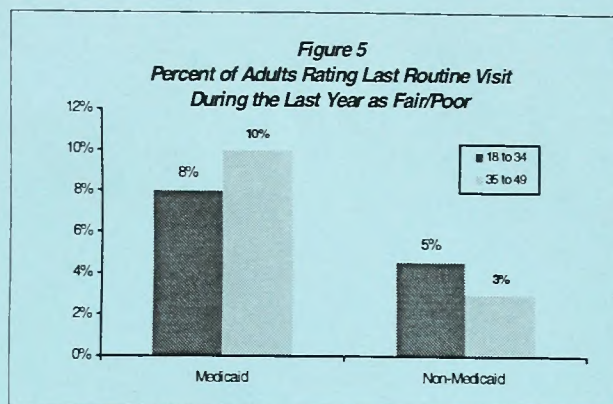


Medicaid enrollees rate the quality of their routine care lower than do non-Medicaid individuals.

- Nine percent of Medicaid enrollees rated their last routine health care visit as fair or poor. Only four percent of non-Medicaid individuals rated their last routine visit as fair or poor (Figure 5).
- Among Medicaid enrollees, the percentage that reported fair to poor increased with age. The opposite was found among non-Medicaid individuals.

Discussion

The fall 1995 North Carolina Health Profile Survey confirms two hypotheses about the Medicaid population - Medicaid enrollees tend to be less healthy than the non-Medicaid population and they are more likely to use expensive sources of routine health care (a hospital, hospital emergency room, or urgent care center).



Part of the reason that Medicaid enrollees are less healthy, on average, is that some people qualify for Medicaid because of illnesses that deplete their economic resources or because they are blind or disabled. Medicaid enrollees were also more likely to have problems getting to or from their source of routine care.

Changing this scenario of both poorer health status and health care practices presents a major challenge to local, state, and federal policy makers. While there are no simple answers, the survey suggests one area for possible intervention – a goal of increasing the use of routine care in the most appropriate setting needs to be a major policy initiative.

The implementation of the Carolina Access Program in North Carolina has focused on properly channeling the Medicaid population through an array of health care services appropriate to needs. Medicaid in conjunction with some counties also initiated a Medicaid-managed care program, again directed at this goal.

Both policy initiatives are still early in their evolution and only time and research will tell if they prove to be effective. To make the most of the opportunity for quality data-based policy making, sound statistical analyses of key Medicaid performance measures should be initiated now.

References

- ¹North Carolina Health Planning Commission Recommendations. Raleigh, December 21, 1994.
- ²N.C. Department of Environment, Health, and Natural Resources, State Center for Health Statistics. *Health and the Elderly in North Carolina—Differences Between Whites and Minorities*. July 1996.
- ³N.C. Department of Environment, Health, and Natural Resources, State Center for Health Statistics. *Health and the Pre-Elderly in North Carolina—Survey Estimates by Race*. July 1996.

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Information is timely and relevant ☐ Yes ☐ No

Charts and graphs are clear and concise ☐ Yes ☐ No

Enough detail was presented on each topic ☐ Yes ☐ No

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